

# Weekly Influenza Report

## Week 14

Report Date: Friday, April 15, 2016

The purpose of this report is to describe the spread and prevalence of influenza-like illness (ILI) in Indiana. It is meant to provide local health departments, hospital administrators, health professionals and residents with a general understanding of the burden of ILI. Data from several surveillance programs are analyzed to produce this report. Data are provisional and may change as additional information is received, reviewed and verified. For questions regarding the data presented in this report, please call the ISDH Surveillance and Investigation Division at 317-233-7125.

### **WEEKLY OVERVIEW**

| Influenza-like Illness - Week Ending April 9, 2016               |          |  |  |
|--|----------|--|--|
| ILI Geographic Distribution                                      | Sporadic |  |  |
| ILI Activity Code  | Minimal  |  |  |
| Percent of ILI reported by sentinel outpatient providers         | 1.38%    |  |  |
| Percent of ILI reported by emergency department chief complaints | 1.38%    |  |  |
| Percent positivity of influenza specimens tested at ISDH         | 28.57%   |  |  |
| Number of influenza-associated deaths to date                    | 56       |  |  |
| Number of long-term care facility outbreaks                      | 0        |  |  |
| Number of school-wide outbreaks                                  | 0        |  |  |

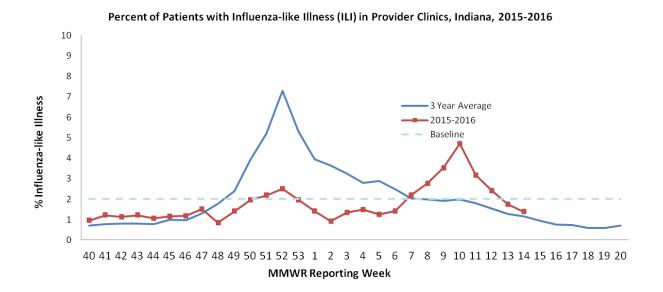


### **SENTINEL SURVEILLANCE SYSTEM**

Data are obtained from sentinel outpatient providers participating in the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet). Data are reported on a weekly basis for the previous Morbidity and Mortality Weekly Report (MMWR) Week by the sentinel sites and are subject to change as sites backreport or update previously submitted weekly data.

| Percent of ILI Reported by Type of Sentinel Outpatient Facility, Indiana, 2015-2016 Season |                        |                       |                           |
|--|------------------------|-----------------------|---------------------------|
| MMWR Week  | All Reporters %ILI (n) | Universities %ILI (n) | Non-Universities %ILI (n) |
| 14   | 1.38% (21)             | 1.09% (8)             | 1.55% (14)                |
| 13   | 1.74 (22)              | 1.33 (9)              | 1.94 (13)                 |
| 12   | 2.40 (25)              | 2.62 (10)             | 2.30 (15)                 |

| Percent of ILI Reported by Age Category in Sentinel Outpatient Facilities, Indiana, 2015-2016 Season |                     |                |  |
|--|---------------------|----------------|--|
| Age Category, years  | Total Number of ILI | Percent of ILI |  |
| 0-4  | 26                  | 38.24%         |  |
| 5-24   | 40                  | 58.82          |  |
| 25-49  | 2                   | 2.94           |  |
| 50-64  | 0                   | 0              |  |
| 65+  | 0                   | 0              |  |
| Total  | 68                  |                |  |



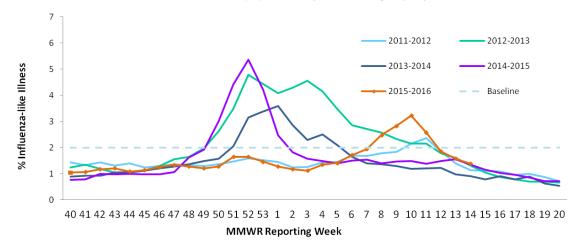


### **SYNDROMIC SURVEILLANCE SYSTEM**

Data are obtained from hospital emergency department chief complaint data through the Indiana Public Health Emergency Surveillance System (PHESS). Data are reported on a weekly basis for the previous Morbidity and Mortality Weekly Report (MMWR) Week and are subject to change as hospitals backreport or update previously submitted weekly data.

| Percent of ILI Reported in Emergency Departments by District, Indiana, 2015-2016 Season |                    |                   |  |
|---|--------------------|-------------------|--|
|   | Previous MMWR Week | Current MMWR Week |  |
| Indiana   | 1.58%              | 1.38%             |  |
| District 1  | 1.32               | 0.98              |  |
| District 2  | 1.88               | 1.53              |  |
| District 3  | 0.90               | 0.74              |  |
| District 4  | 1.39               | 1.59              |  |
| District 5  | 1.62               | 1.28              |  |
| District 6  | 2.13               | 1.91              |  |
| District 7  | 1.96               | 1.43              |  |
| District 8  | 1.65               | 1.38              |  |
| District 9  | 1.95               | 1.80              |  |
| District 10   | 1.08               | 1.45              |  |

### Percent of Patients with Influenza-Like Illness (ILI) Chief Complaint in Emergency Departments, Indiana, 2015-2016





### **INFLUENZA-ASSOCIATED MORTALITY**

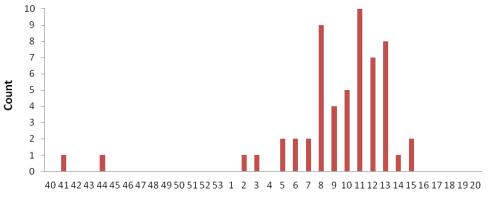
Data are obtained from the Indiana National Electronic Disease Surveillance System (I-NEDSS). Influenza-associated deaths are reportable within 72 hours of knowledge; however, not all cases are reported in a timely manner so data in this report as subject to change as additional cases are back-reported.

| Number of Influenza-Associated Deaths for All Ages*, Indiana, 2015-2016 Season |              |  |  |
|--|--------------|--|--|
| Age Category, years  | Season Total |  |  |
| 0-4  | 0            |  |  |
| 5-24   | 4            |  |  |
| 25-49  | 8            |  |  |
| 50-64  | 24           |  |  |
| 65+  | 20           |  |  |
| Total  | 56           |  |  |

<sup>\*</sup>Due to changes in the reporting rule as of 12/2015, influenza-associated deaths are reportable if either laboratory confirmed or listed as cause of death on death certificate. Therefore, case counts are not directly comparable to previous seasons in which influenza-associated deaths were only reportable by laboratory confirmation.

| Counties with ≥5 Laboratory Confirmed Influenza-Associated Deaths for All Ages, 2015-2016 Season |              |        |              |
|--|--------------|--------|--------------|
| County   | Season Total | County | Season Total |
| Lake   | 11           |        |              |
| Marion   | 17           |        |              |
| Allen  | 5            |        |              |

## Number of Reported Influenza-Associated Deaths by Week of Death, All Ages, Indiana, 2015-16



**MMWR Reporting Week** 



### **VIROLOGIC SURVEILLANCE**

| Circulating Influenza Viruses Detected by ISDH Laboratory*, Indiana, 2015-2016 Season |         |            |              |            |
|---|---------|------------|--------------|------------|
|   | Week 14 |            | Season Total |            |
| 2022  | A       | Percent of | A            | Percent of |
| PCR Result  | Number  | Specimens  | Number       | Specimens  |
|   |         | Received   |              | Received   |
| 2009 A/H1N1pdm virus  | 1       | 7.1%       | 215          | 36.9%      |
| Influenza A/H3 seasonal virus   | 1       | 7.1%       | 70           | 12.0%      |
| Influenza A/H1 seasonal virus   | 0       | 0%         | 0            | 0%         |
| Influenza B seasonal virus  | 2       | 14.3%      | 36           | 6.2%       |
| Influenza negative  | 10      | 71.5%      | 241          | 41.4%      |
| Inconclusive  | 0       | 0%         | 8            | 1.4%       |
| Unsatisfactory specimen†  | 0       | 0%         | 11           | 1.9%       |
| Influenza Co-infection <sup>∆</sup>   | 0       | 0%         | 1            | <1%        |
| Total   | 14      | 100%       | 582          | 100%       |

<sup>\*</sup>Data obtained from the ISDH Laboratory via specimens submitted from the ISDH Sentinel Influenza Surveillance System and IN Sentinel Laboratories.

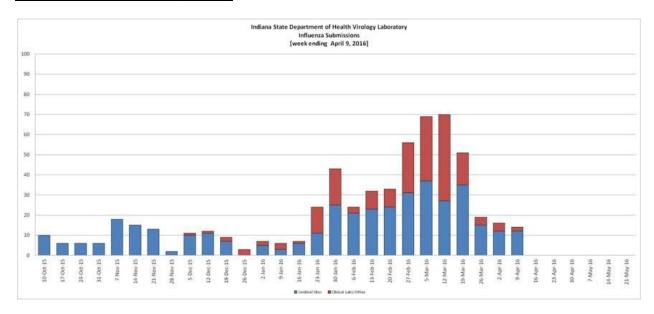
 $<sup>^{\</sup>Delta}$  Influenza co-infection was influenza A/H3 and influenza A/H1N1pdm.

| Circulating Non-Influenza Viruses Detected by the ISDH Laboratory, Indiana, 2015-2016 Season |         |                                 |  |
|--|---------|---------------------------------|--|
| Result   | Week 14 | Season Total<br>(Since 10/1/15) | Early Surveillance<br>(9/1/15 - 9/30/15) |
| Adenovirus   | 1       | 7                               | 0  |
| Coronavirus 229E   | 0       | 0                               | 0  |
| Coronavirus HKU1   | 0       | 0                               | 0  |
| Coronavirus NL63   | 0       | 0                               | 0  |
| Coronavirus OC43   | 0       | 0                               | 0  |
| Enterovirus NOS  | 0       | 0                               | 0  |
| Enterovirus/Rhinovirus   | 0       | 2                               | 1  |
| Human Metapneumovirus  | 0       | 0                               | 0  |
| Parainfluenza 1 Virus  | 0       | 1                               | 1  |
| Parainfluenza 2 Virus  | 0       | 1                               | 0  |
| Parainfluenza 3 Virus  | 0       | 1                               | 0  |
| Parainfluenza 4 Virus  | 0       | 1                               | 0  |
| Rhinovirus   | 0       | 0                               | 0  |
| Respiratory Syncytial Virus  | 0       | 2                               | 0  |
| Total  | 1       | 15                              | 2  |

Unsatisfactory specimens include specimens that leaked in transit, were too long in transit, or were inappropriately labeled.



## **VIROLOGIC SURVEILLANCE (GRAPH)**





### **FLU REVIEW**

#### **Flu Vaccine Resources**

- <u>National Infant Immunization Week (NIIW)</u> will be held April 16–23, 2016, emphasizing that
  protecting infants from vaccine-preventable diseases plays a vital role in promoting healthy
  communities. Promotional and educational materials are available on the <u>NIIW website</u>, and visit
  the <u>NIIW Activities around the World page</u> to view NIIW events or to share your organization's
  planned activities for the week (CDC).
- Free continuing education credits (CME, CEU, and CPE) are available for completing the archived
  March 23 "Current Issues in Vaccines" webinar presented by Paul Offit, MD, the director of the
  Vaccine Education Center (VEC) at the Children's Hospital of Philadelphia. An update on influenza
  vaccines and egg allergies is among the vaccine topics discussed. Access the VEC's Vaccine Webinar
  Archive for this and other presentations available for credit.
- Continuing education credit is available upon viewing the <u>recast</u> of the March 16 Current Issues in Immunization NetConference (CIINC), covering the 2016 updates to child, adolescent, and adult immunization schedules.

### **Flu News and Related Studies**

- Influenza activity in the United States is slowly decreasing, and remains at the national baseline.
   Eighteen states are still reporting widespread influenza activity, with Indiana reporting sporadic activity levels. View the <a href="map">map</a> of weekly influenza activity in the U.S. and the latest <a href="FluView report">FluView report</a> for more about current influenza activity, trends, and impact throughout the United States (CDC).
- An Arkansas-based study found that increased influenza vaccination coverage through public schools
  providing vaccinations to students was associated with a reduced rate of influenza-related student
  absenteeism; these findings emphasize the importance of school-based clinics (<u>Journal of School</u>
  <u>Health</u>).
- The National Association of County & City Health Officials (NACCHO) conducted an assessment of local health department use of Immunization Information Systems (IIS). The assessment results indicate that the most-utilized IIS functions are patient histories and forecasts, and local health departments would like expanded IIS capabilities. NACCHO has posted key findings from the assessment on its blog.

### For Further Information, Visit:

www.in.gov/isdh/25462.htm www.cdc.gov/flu www.flu.gov